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PTO/SB/17 (11-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Patent fees on 10/01/2004. Patent fees are subject to annual revision.

# FEE TRANSMITTAL For FY 2005

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
180

## Complete if Known

Application Number 10/608,885  
Filing Date June 27, 2003  
First Named Inventor Robert Keane  
Examiner Name Gabriel Garcia  
Art Unit 2624  
Attorney Docket No. MPJ-51

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order

☒ Deposit Account ☐ None

Deposit Account Number 502765  
Deposit Account Name VistaPrint USA

The Director is hereby authorized to: (check all that apply)

- ☒ Charge fee(s) indicated below  
☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  
☐ Credit any overpayments

to the above-identified deposit account.

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## FEE CALCULATION

### 1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	
Subtotal (1) \$			

## FEE CALCULATION (continued)

### 2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 20 or HP = x =  
HP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)  
- 3 or HP = x =  
HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims Fee (\$) Fee Paid (\$)

Subtotal (2) \$

### 3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. fee	180	180	180
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
Other:			

Subtotal (3) \$ 180

## SUBMITTED BY

Signature	Robert Dulaney	Registration No. (Attorney/Agent)	28071	Telephone	781 547 6360
Name (Print/Type)	Robert Dulaney			Date	Nov. 24, 2004

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Robert Keane et al                      Group Art Unit: 2624  
Serial No.: 10/608,885                                  Examiner: Gabriel Garcia  
Filed: June 27, 2003                                  Attorney Docket No.: MPJ-D1  
Title: BROWSER-BASED PRODUCT DESIGN

Commissioner for Patents  
Alexandria, VA 22313-1450

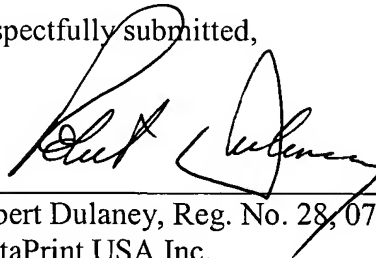
**INFORMATION DISCLOSURE STATEMENT**

Sir:

In compliance with the duty imposed by 37 CFR §1.56, and in accordance with 37 CFR §§ 1.97 *et. seq.* the information cited in the accompanying Form PTO/SB/08A is being brought to the attention of the U.S. Patent Office in connection with examination of the subject application. No admission is being made that the cited information in fact constitutes prior art or is material prior art.

Copies of the listed documents and the required filing fee are submitted herewith.

Respectfully submitted,



Robert Dulaney, Reg. No. 28,071  
VistaPrint USA Inc.  
100 Hayden Avenue  
Lexington, MA 02421  
Phone: 781-890-8434 x 160  
Fax: 781-577-7208

Date: November 24, 2004

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/608,885
Filing Date	June 27, 2003
First Named Inventor	Robert Keane
Art Unit	2624
Examiner Name	Gabriel Garcia
Attorney Docket Number	MPJ-D1

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard US Patent 6,247,011 US Patent 6,631,375
<div>Remarks</div>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	Robert Dulaney		
Date	November 24, 2004	Reg. No.	28071

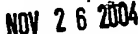
### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Robert Dulaney	Date	November 24, 2004

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Substitute for form 1449/PTO

*(Use as many sheets as necessary)*

Sheet	1	of	1
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**Complete if Known**

Application Number	10/608,885
Filing Date	June 27, 2003
First Named Inventor	Robert Keane
Art Unit	2624
Examiner Name	Gabriel Garcia
Attorney Docket Number	MPJ-D1

[illegible][illegible]

Examiner  
Signature

Date	
Considered	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

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